



Early Stage of Labor: FAQs & At-Home Care Instructions

What can I expect when I go into labor?

- Labor progresses in 4 parts: early, active/transition, pushing/delivering the baby, and delivering the placenta.

What is early labor?

- In this first phase of labor, contractions help the cervix dilate (widen) and efface (thin out) from 0 to 6 centimeters.

What do early labor contractions feel like?

- Contractions are mild to moderate in intensity and have a shorter duration - about 30 to 45 seconds each.
- Contractions may also be irregular, about 5 to 20 minutes apart, and they may even stop at times.
- You can usually keep talking during contractions.

How long does early labor last?

- For people who have never birthed before, early labor can last from hours up to 2 to 3 days. It can take up to 9 to 11 hours for most people's cervixes to dilate between 4 and 6 centimeters.
- Early labor is a marathon, not a sprint! Try to conserve energy and stay well fed and hydrated.

Should I stay at home or go to hospital in early labor?

- There are many benefits to staying home during early labor, including:
 - Allows for birthing people to return home and rest in their own environment.
 - Allows for later admission to the hospital, which is associated with lower rates of labor interventions including use of oxytocin, artificial breaking of waters, epidural use, and internal fetal monitoring.
 - Decreases probability of an attempted vaginal birth ending in a cesarean section.
 - May decrease length of hospital stay overall.

How will I know when I am in active labor?

- Contractions will become more intense.
- Contractions will occur more regularly, usually occurring about every 2 to 5 minutes. Contraction will last longer, about 50 to 70 seconds.
- You will feel contractions even when you change positions and walk or move around.
- You will no longer be able to talk through contractions.

What do I do when I think I may be in active labor?

- It can be hard to tell if you are in active labor; if needed, check in with UCSF L&D Triage at 415-476-7788 about when to arrive.
- You may be given special instructions if your water broke or if you tested positive for group B strep (GBS is a routine test that is administered as your due date approaches).

What can I do to manage sensations in early labor?

- There are many nonpharmacologic methods for reducing the experience of painful stimulations. Many of these also reduce anxiety, stress, and fear, leading to a more positive birth experience.
- First, take a deep breath! Breathing exercises can help with the experience of contractions - try the “sighing out slowly” method:
 - Take a deep breath in through your nose at the beginning of a contraction.
 - Hold your breath at the top for a moment.
 - Then “sigh out slowly” either through your nose or pursed lips while imagining a part of your body relaxing.
 - In general, the exhale should be twice as long as the inhale, so counting can help (for example: in for 4, hold for 2, out for 8).
 - Avoid breathing too rapidly, this can cause unnecessary agitation.
- Get support - having a support person with you from early labor until after childbirth can have a positive effect on childbirth.
- Try massage and/or acupressure - ask your partner, labor coach, doula, or friend:
 - Shoulder and low back massage during contractions may ease your pain.
 - Strong massage of the back muscles or hips (counterpressure) during contractions may help relieve the pain of back labor.
 - Tell your labor coach exactly where and how hard to push.
- Change positions often during - walking, kneeling, or sitting on a big rubber ball (birth ball) are good options to decrease pain perception.
 - Changing positions often can also help dilate the cervix more quickly.
- Practice mindfulness-based coping strategies - use specific techniques to focus on the present moment, without judgment, to reduce experiences of pain, anxiety, stress, and fear:
 - Try using imagery – use your imagination to decrease your experience of pain. For example:
 - Picture your contractions as gentle waves rolling over you.
 - Picture a peaceful place, such as a beach or mountain stream, to help you relax between contractions.
 - There are many meditations for mindfulness, guided imagery, and pain reduction on the internet.
- Water immersion - take a warm shower or bath, warm water may ease pain and stress.
 - Warm baths during labor are associated with lower rates of epidural use.
- Aromatherapy - can help with perception of pain as well as anxiety and fear.
 - In general, lavender and chamomile are calming, peppermint and citrus scents are energizing.
- Find distractions - during early labor you can walk, play cards, watch TV, or listen to your favorite music to help take your mind off your contractions.
- Use a TENS Unit (transcutaneous electrical nerve stimulation) - brings low-voltage electrical surges via a small handheld battery to your back via electrode patches to decrease sensations associated with contractions.
 - TENS units can deliver continuous or pulsing patterns of buzzing or prickling sensations that can distract one from labor pain
 - Some TENS units are specifically made for labor and delivery

- Therapeutic Rest - if you arrive at the hospital in Early Labor, you may be offered “morphine sleep” prior to going home (see Therapeutic Rest handout). This can help get you 2-5 hours of rest.
- Avoid “pain catastrophizing” - try to think about contractions as “intense sensation” rather than “pain” and avoid anticipation of pain between contractions, which can heighten stress and anxiety.

Remember to stay hydrated and nourished during early labor! Labor is like a marathon, not a sprint, and you will have more energy and your contractions will be more effective with adequate hydration and nourishment!

What are some danger signs/symptoms in early labor:

- Call UCSF at L&D Triage at **415-476-7788** if you have any of the following symptoms:
 - Moderate vaginal bleeding (similar to your menses),
 - Pass greater than a quarter-sized blood clot,
 - Severe pain in your belly or pelvis that doesn't get better between contractions,
 - Have not been able to feel the baby move for several hours,
 - A sudden new headache, vision changes, or severe pain in your liver (upper right side of your abdomen), or
 - You think you have a fever.

**PLEASE CALL UCSF LABOR AND DELIVERY TRIAGE AT
415-476-7788 WITH ANY QUESTIONS OR CONCERNS!**

WE ARE HERE FOR YOU!